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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	Not Yet Assigned
	Filing Date	HEREWITH
	First Named Inventor	David J. OTWAY
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	CXT-052DV

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:
☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

OR

☒ Firm or
Individual Name **LAHIVE & COCKFIELD, LLP**
John D. Lanza
Address **28 State Street**City **Boston**Country **US**

State

MA

Zip

02109Telephone **(617) 227-7400**

Fax

(617) 742-4214

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of RecordName **David Friedman - Vice President, General Counsel & Secretary**Signature 

Date

March 29, 2004

Telephone

954-267-2392

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐
Total of 1 forms are submitted.